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FACSIMILE COVER SHEET**TO:** Examiner Hai Chi Pham
Group Art Unit 2861**FROM:** Michael K. O'Neill**RE:** U.S. Application No. 10/754,530
Atty. Docket No.: 03560.003420**FAX NO.:** (571) 273-8300**DATE:** May 22, 2006**NO. OF PAGES:**
(including cover page) 11**TIME:** 4:49**SENT BY:** [Signature]**MESSAGE**

Attached is an Amendment in response to the Office Action dated February 22, 2006.

I hereby certify that this correspondence is being facsimile transmitted to the U.S. Patent and Trademark Office on:

May 22, 2006

(Date of Deposit)

Michael K. O'Neill, Reg. No. 32,622

(Name of Attorney for Applicant)

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Signature

May 22, 2006

Date of Signature

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MAY 22 2006

In re Application of:

Docket No. 03560.003420

TAKAAKI TSURUYA

Application No.: 10/754,530

Examiner: H. Pham

Filed: January 12, 2004

Group Art Unit: 2861

For: IMAGE FORMING APPARATUS

Date: May 22, 2006

THE COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

☒ No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 4	MINUS	** 20	= 0	x \$25 \$50	- 0 -
INDEP. CLAIMS	* 1	MINUS	*** 3	= 0	x \$100 \$200	- 0 -
Fee for Multiple Dependent claims \$180°/\$360						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						- 0 -

* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

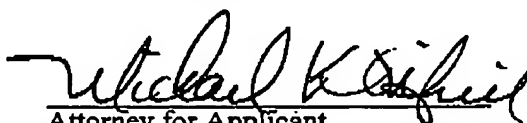
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(Date of Deposit)Michael K. O'Neill, Reg. No. 32,622
(Name of Attorney for Applicant)

Signature

May 22, 2006
Date of Signature

- ☐ Verified Statement claiming small entity status is enclosed, if not filed previously.
- ☐ A check in the amount of \$ _____ is enclosed.
- ☐ Charge \$ _____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
- ☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
- ☐ A check in the amount of \$ _____ to cover the fee for a _____ month extension is enclosed.
- ☐ A check in the amount of \$ _____ to cover the Information Disclosure Statement fee is enclosed.
- ☒ Applicant's undersigned attorney may be reached in our Costa Mesa, California office by telephone at (714) 540-8700. All correspondence should continue to be directed to our address given below.

Respectfully submitted,


Attorney for Applicant
Michael K. O'Neill
Registration No.: 32,622

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MAY 22 2006

PATENT APPLICATION

03560.003420

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)
: Examiner: H. Pham
TAKAAKI TSURUYA)
: Group Art Unit: 2861
Application No.: 10/754,530)
:
Filed: January 12, 2004)
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For: IMAGE FORMING)
: May 22, 2006
APPARATUS)

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT


Sir:

In response to the Office Action dated February 22, 2006, please amend the
above-identified application, as follows:

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(Date of Deposit)

Michael K. O'Neill, Reg. No. 32,622
(Name of Attorney for Applicant)


Signature Date of Signature May 22, 2006